

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Accounting for Payroll System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2 Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Accounting for Payroll System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-01-1013-00-402-124
7 Privacy Act System of Records (SOR) Number:	09-90-0018
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Accounting For Pay System (AFPS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Vincent Watson
12 Provide an overview of the system:	Automated interface between the Department's central payroll and the HHS agencies for payroll cost distribution. Provides a systematic interface of payroll accounting information necessary to account for disbursements, expenditures, obligations and accruals for personnel costs. Legislation: Chief Financial Officers Act of 1990.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The information is shared with the agencies accounting, budget and administrative offices.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The agencies recieve payroll expenditures and use this data for financial reporting and tracking their budgets (payroll costs). The data transmitted meets the standard that was established by the Department for capturing payroll costs.
18 Describe the consent process:	Information recieved is from HHS payroll systems (Civilian and Commisioned Corps) and is processed to properly account for payroll costs. Agencies are aware of incoming files via a scheduled processing calendar.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Technical and Physical controls are in place to ensure the security of the information. These include an up to date System Security Plan, Contingency Plan, regular offsite backup of the data, and yearly security awareness training for all personnel. Also, the system is part of the yearly SAS-70 (Statement on Auditing Standards No. 70) audit which tests the adequacy and effectiveness of the opperating controls. Specific protection for PII include: 1- Electronic data is password protected 2- Access to electronic data is role-based 3- Documents are locked in file cabinet accessible only to mgt and admin assts
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM ACF General Support System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM ACF General Support System
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	ACF GSS
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The ACF GSS is a local area network supporting the operations of the HHS/ACF.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM AHRQ Local Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM AHRQ Local Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	AHRQ General Support System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	AHRQ GSS is a LAN supporting the operations of the HHS/AHRQ.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM AoA General Support System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM AoA General Support System
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	AoA General Support System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The AoA GSS is a lan supporting operations of the HHS/AoA.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	The system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Asset Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Asset Management System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1030-00-405-144
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Asset Management System (AMS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Debbie Orfe/Jack Sweeney
12 Provide an overview of the system:	Provides access to property data by Asset Center Representatives from DHHS agencies. AMS is the repository for asset records for a number of organizations within the DHHS. AMS generates the debits and credits related to the capitalized value, period depreciation expense, and net book value disposition of an asset if disposed before its service life has expired, stores the values into a subsidiary Standard General Ledger (SGL) account, and transfers the summary values to the PSC Financial Management Services (FMS). AMS has a built in reporting module, allowing the Asset Center Representatives (ACRs) to generate reports for the assets and users of the organizations to which the ACRs belong.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	AMS does not collect PII information
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	No IIF is contained in this system
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Jun 13, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM AutoCAD

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM AutoCAD
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Nov 15, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	No
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	AutoCAD
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Sheila Grossman
12 Provide an overview of the system:	Used to provide architectural and renovation drawings for Parklawn building. Pricing for renovations is done using this tool. Monthly rent calculations are done using this application.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	No
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	No
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Dec 1, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM CORE Accounting System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question

Response

- 1 System:

OS ASAM CORE Accounting System
- 2 Is this a new PIA?

No
- 3 If this is an existing PIA, please provide a reason for revision:

PIA Validation
- 4 Date of this Submission:

May 3, 2006
- 5 OPDIV Name:

OS
- 6 Unique Project Identifier (UPI) Number:

009-91-01-01-01-1010-00-402-124
- 7 Privacy Act System of Records (SOR) Number:

09-90-0024
- 8 OMB Information Collection Approval Number:

N/A
- 9 Other Identifying Number(s):

N/A
- 10 System Name:

Core Accounting System (CORE)
- 11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:

Matt Zaklielarz
- 12 Provide an overview of the system:

Legacy accounting and financial management system used by the Program Support Center and its customer agencies. The CORE is the PSC legacy accounting and financial management system. The reporting for CORE also includes the Accounts Receivable Module (formerly System) and the Managing/Accounting Credit Card System (MACCS). Legislation: Chief Financial Officers Act of 1990, Certifying Officers Act of 1941, Prompt Payment Act of 1989, and the Cash Management Improvement Act of 1990. Existing
- 13 Indicate if the system is new or an existing one being modified:

Existing
- 14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?

Yes
- 15 Is the system subject to the Privacy Act?

Yes
- 16 If the system shares or discloses IIF please specify with whom and for what purpose(s):

Information is shared with the Department of the Treasury as part of the disbursement process. Treasury - Disbursements
- 17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:

Information is not normally collected from the public. The information is primarily collected from procurement documents (e.g., purchase orders and contracts) and the data is used to process paper and electronic disbursements through the Department of Treasury. The information collected is the minimal required to process disbursement s payable to individuals in satisfaction of Government obligations.
- 18 Describe the consent process:

Information is obtained from the procurement documents (purchase order, contract, etc.) which are processed by the relevant procurement office. The information collected is legally required to process the payments as1sociated with the purchase order/contract and is part of the contract terms and conditions.
- 19 Does the system host a website?

No
- 20 Does the website have any information or pages directed at children under the age of thirteen?

No
- 21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?

Yes
- 22 Are there technical controls present?

Yes
- 23 Describe the IIF security controls:

Technical and physical controls are in place to ensure the security of the information. These include an up to date System Security Plan, Contingency Plan, regular offsite backup of the data, and yearly security awareness training for all personnel. Also, the system is part of the yearly SAS 70 (Statement on Auditing Standards No. 70) audit which tests the adequacy and effectiveness of the operating controls.
- 24 Sr Official of Privacy Signature:

C. Byrne Huntley
- 25 Sr Official of Privacy Signoff Date:

May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Debt Management Collection System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Debt Management Collection System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 5, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-01-01-1011-00-402-127
7 Privacy Act System of Records (SOR) Number:	09-40-0012
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Debt Management and Collection System (DMCS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Don Pooten
12 Provide an overview of the system:	Automated system for the performance of receivables management and Core Accounting System feeder system. Legislation: Debt Collection Act of 1982 and the Debt Collection Improvement Act of 1996.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Information is shared with credit reporting agencies, collection agencies, the Department of the Treasury and the Department of Justice as part of the debt collection process. Credit reporting agencies - Credit reporting Collection agencies - debt collection Treasury TOP - Debt collection referrals Department of Justice - litigation IRS - Write offs and interest paid
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Information is not normally collected from the public. The information is primarily collected from the referring agency program offices as a result of defaulted loans, scholarships, etc. The information is used to record and collect the receivables owed the Government by the public.
18 Describe the consent process:	Information is obtained from the agency program offices as a result of defaulted scholarships, loans, etc. and other sources throughout the due diligence process (e.g., collection agency, credit reporting agency, Department of Justice, etc.) No notice is given to individuals for consent, etc. Through demand letters in the due diligence process, individuals are given the opportunity to pay their debt to the Government before information is forwarded to collection agencies, credit reporting bureaus, etc.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Technical and physical controls are in place to ensure the security of the information. These include an up to date System Security Plan, Contingency Plan, regular offsite backup of the data, and yearly security awareness training for all personnel. Also, the system is part of the yearly SAS-70 (Statement on Auditing Standards No. 70) audit which tests the adequacy and effectiveness of the operating controls.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Defense Contract Management Agency

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Defense Contract Management Agency
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Oct 31, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-02-1031-00
7 Privacy Act System of Records (SOR) Number:	09-15-0004
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	DCMA
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Kathy Moring, Capt. USPHS; Kim Frasher, DCMA Project Manager
12 Provide an overview of the system:	HHS values and benefits from a workforce that is physically well, they support the efforts of DCMA in achieving this goal. DCMA assists employees and employers to resolve medical problems that may adversely impact their work performance, conduct, health and well-being by tracking the subject’s repetitive exposure to items that could be detrimental to the subject’s health. In order to achieve these objectives, of tracking these exposures, the DCMA case management and reporting system was developed.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Medical officers use for review of medical data. DCMA assists employees and employers to resolve medical problems.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Patient demographic data to include name, DOB, SSN or unique ID, height, weight and other basic medical information. The demographic information is used to track the individual in the database. The medical information is used for Health Surveillance. The demographic data contains IIF (name, SSN, DOB, physical chaacteristics. If employees do not want to provide information needed to establish a medical record, then this information is forwarded to the Agency. The Agency policies will dictate what process is followed for doing the exam (regulatory, agency mandated, voluntary surveillance, etc.). Patients log information from physicals, basic data, physical reports, genetic issues, illnesses and remediation plans go directly to the supervisor.
18 Describe the consent process:	All employees are required to read the FOH privacy statement when they have their exam in the OHC and are asked to sign an authorization for disclosure which describes what information will be disclosed outside of FOH. All employees are asked to sign a release of information form before information and any identifiable information is transferred or released from DCMA.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Defense Contract Management Agency

- 23 Describe the IIF security controls:

Management, operational, and technical controls commensurate with the level of sensitivity for the system, including: - Electronic data is encrypted during transmission.- Electronic data is password protected- Access to electronic data is role-based- Access to electronic data is based on “least privilege”- Access to electronic data is limited by number of attempts, session lock, session termination- Documents are stored in locked file cabinets / offices.- Documents are shredded (Medical Records are archived) when no longer needed- The application servers are isolated from the rest of the FOH network by PIX firewalls, which control access to the application data.
- 24 Sr Official of Privacy Signature:

Darlene Christian
- 25 Sr Official of Privacy Signoff Date:

Jan 18, 2007

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Defense Financial & Accounting System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Defense Financial & Accounting System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Sep 16, 2004
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	new system -- appropriate documentation still in process
7 Privacy Act System of Records (SOR) Number:	N/A -- this is just a pass-through interface
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	DFAS
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	HHS/OS/ASAM/OHR
12 Provide an overview of the system:	Interface to the DoD payroll system and the HHS time and attendance system, etc.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	HHS OPDIVs responsible for the interconnecting system, and the U.S. Department of Defense who are owners of DFAS main system; this is just a pass-through interface. HHS OPDIV owners of the interconnected systems, DoD as owner of the DFAS system
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This is just a pass-through interface for transmitting HHS payroll information from the HHS time and attendance system (EHRP) to the DoD payroll payment system, using the HHS/NIH mainframe.
18 Describe the consent process:	This is just a pass-through interface
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A -- This is just a pass-through interface
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Departmental Contract Information System
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The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2	Summary of PIA Required Questions
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Question	Response
1 System:	OS ASAM Departmental Contract Information System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 21, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-01-02-0002-00-405-143
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Departmental Contracts Information System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Fred Evans
12 Provide an overview of the system:	The DCIS mission is to provide the data collection and reporting capabilities needed to enable HHS to comply with the reporting requirements mandated by Public Law 93-400 for the reporting of procurement actions.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	DCIS provides a single system capability within HHS that collects, edits and stores information on individual procurement and contracting actions executed by the Operating Divisions (OPDIVs) and other HHS offices. No IIF information is collected.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM DPM Local Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM DPM Local Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Oct 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-01-01-1010-00-402-124
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	DPM LAN
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Matt Zaklielarz
12 Provide an overview of the system:	The DPM LAN provides local connectivity for the DPM office.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	No
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	N/A -- a GSS
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Dec 1, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Electronic Human Resources and Payroll

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Electronic Human Resources and Payroll
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 5, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-01-1100-00-403-250
7 Privacy Act System of Records (SOR) Number:	09-90-0018
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Electronic Human Resources and Payroll (EHRP)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Carol Arbogast
12 Provide an overview of the system:	A system for collecting, tracking, routing and maintaining information relating to personnel actions and determinations made about an employee while employed at HHS.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Human Resource personnel, supervisors, and employees. OPM Reporting, and Internal Agencies Reporting
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Personnel and payroll information required by personnel management specialists and managers in order to process and properly execute agency personnel actions.
18 Describe the consent process:	Information is collected from individuals. Consent is granted as part of the employee induction process.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The following administrative, technical, and physical controls are in place for EHRP:Administrative ControlsSystem security plan Contingency (or backup) plan File backup Backup files stored offsite User manualsSecurity Awareness TrainingContractor AgreementsLeast Privilege AccessIIF PoliciesTechnical ControlsUser Identification and PasswordsFirewallEncryptionIntrusion Detection System (IDS)Physical ControlsGuardsIdentification BadgesKey Cards
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Electronic Official Personnel Folder

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Electronic Official Personnel Folder
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 24, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-02-1120-00-403-205
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	electronic Official Personnel Folder
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Ann Speyer
12 Provide an overview of the system:	Converts all HHS' paper-based Federal civilian employee Official Personnel Folders (OPF) to electronic format.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	HHS employees only, and they only have access to their own personnel folder
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Temporary and permanent HHS employee official personnel records. Contains IIF information not subject to the Privacy Act.
18 Describe the consent process:	Collected from the HHS Electronic Human Resources and Payroll (EHRP) System
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	On the HHS Intranet, locked down behind firewalls, with access permitted only to individual whose name matches the folder. Individuals are required to use passwords and be on the HHS network.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Electronic-Induction

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Electronic-Induction
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 24, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-02-1150-00-403-251
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	PMT: PSC11
10 System Name:	E-Induction
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Jack Stoute
12 Provide an overview of the system:	On-line systems for new hires
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Information that new hires need to know. Contains no IIF information.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A -- This is a duplication of E-INDUCTION
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Elite Series System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Elite Series System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Mar 27, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1050-00-405-144
7 Privacy Act System of Records (SOR) Number:	09-90-0024
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	EliteSeries System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Irene Grubb
12 Provide an overview of the system:	Provides cradle-to-grave management of the Supply Services Center's inventory and customers orders. It is made up of several modules wich are function-specific: Accounts Recievable, Accounts Payable, Inventory Management, Order Management, Purchasing, Production, Warehouse Management. The EliliteSeries Sytem is an off-the-shelf Software product licenesed by the SSC, and installed with no modifications.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	EliteSeries System does not collect PII information.
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	No IIF is contained in the system
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Enterprise E-Mail System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Enterprise E-Mail System
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0009-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Enterprise E-Mail System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	EES is also known as the "HHSMail" system
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM FOH Local Area Network/Wide Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM FOH Local Area Network/Wide Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Oct 2, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1040-00-404-142
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	FOH LAN/WAN
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Eric Shih, CDR USPHS
12 Provide an overview of the system:	The FOH LAN/WAN provides local connectivity for the FOH BTS office and wide area connectivity for the various FOH office locations Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	No
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	N/A -- a GSS
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Dec 1, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Government Transformation Center computer room

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Government Transformation Center computer room
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Government Transformation Center (GTC) computer room
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The Government Transformation Center is a data center facility located in Unisys' Reston, VA complex which houses HHS Enterprise systems, HHS/OS OITO / ITSC GSSs and the HHS/OS OITO ITSC Network Operations Center.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This facility does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This facility does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This facility does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Feb 22, 2007

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM HHH computer room

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM HHH computer room
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	HHH computer room
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The HHH computer room is a data center facility located in HHS's Hubert H. Humphrey building.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This facility does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This facility does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This facility does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This facility does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM HHSNet

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM HHSNet
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0006-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	HHSNet
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	HHSNet is the enterprise backbone network that supports the interconnection and Internet access requirement's of the various networks supporting the individual Departmental StaffDivs/OpDivs. Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Integrated Time and Attendance System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Integrated Time and Attendance System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Feb 21, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1016-00-403-253
7 Privacy Act System of Records (SOR) Number:	09-90-0018
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Integrated Time and Attendance System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Carol Arbogast
12 Provide an overview of the system:	ITAS is a timekeeping by exception application that supports most aspects of tracking and reporting work hours and leave for federal employees. ITAS provides users with access to real-time leave balances and ensures that users accurately record work activity by enforcing time and attendance policies and procedures specific to the Federal Government. ITAS contains rules specific to data entered by Employees, Timekeepers, Approving Officials, Administrative Officers, and ITAS Administrators.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Employee Express-Etc. Application Messaging to Centers For Disease Control and Prevention
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The information entered into this data system becomes a part of the NIH Payroll System and documents daily time and attendance for employees. The primary use of the information is to prepare the NIH payroll and compute leave balances. The information may be used in and disclosure may be made to (1) W-2 forms for transmittal to IRS and State and local Governments; (2) Various listings, tapes and schedules for transfer to the Department of Treasury for issuance of salary payments; (3) Listings of moneys sent to financial organizations biweekly for direct deposits; (4) Quarterly reports to IRS; (5) Law enforcement; and (6) Reports to OPM for retirement calculations. Data is aggregated to prepare various reports to OPM, the Treasury, and other agencies, but such reports do not include information by name or other identifying number of characteristics.
18 Describe the consent process:	Consent is obtained as part of the condition of employment.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Integrated Time and Attendance System

- 23 Describe the IIF security controls:
- ITAS is a client/server-based application using components running on several different computing platforms. Each ITAS user is assigned a User ID and password. User IDs and passwords are managed by the ITAS Coordinators or Timekeepers through a user profile program. Granting ITAS Coordinator privileges is done centrally by the ITAS administrator.
- The following administrative, technical, and physical controls are in place for ITAS:
- Administrative Controls
- System security plan
- Contingency (or backup) plan
- File backup
- Backup files stored offsite
- User manuals
- Security Awareness Training
- Contractor Agreements
- Least Privilege Access
- IIF Policies
- Technical Controls
- User Identification and Passwords
- Firewall
- Encryption
- Intrusion Detection System (IDS)
- Physical Controls
- Guards
- Identification Badges
- Key Cards
- 24 Sr Official of Privacy Signature:
- C. Byrne Huntley
- 25 Sr Official of Privacy Signoff Date:
- May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM ITSC Security Program

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM ITSC Security Program
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 30, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	ITSC Security Program
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	Weaknesses identified for the infrastructure program
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	N/A
18 Describe the consent process:	N/A
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Managing & Accounting Credit Card System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Managing & Accounting Credit Card System
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	May 18, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-01-02-1200-00-402-124
7 Privacy Act System of Records (SOR) Number:	09-90-0024
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	Managing & Accounting Credit Card System (MACCS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Matt Zakielarz
12 Provide an overview of the system:	MACCS is a system designed to provide access to and account for credit card purchases. Using transaction data from the credit card processing ceter at the US Bank, MACCS is a downstream process that provides a means for ensuring that each transaction is a valid transaction, revirewed by an authoirzed official, assigned to a proper budgetary fund, paid in a timely manner and transmitted for posting to the general ledger
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Internal HHS Financial Management Staff
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The MACCS system will process valid transaction reviewed by an authorized official, proper budgetary funds and transmitted for posting to the general ledger. System contains IIF information pertaining to credit card numbers and SSN's.
18 Describe the consent process:	Use of the system by the individual addresses consent.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Managing & Accounting Credit Card System

- 23 Describe the IIF security controls:

The following administrative, technical, and physical controls are in place for MACCS:

Administrative Controls
C&A Completed
System security plan
Contingency (or backup) plan
File backup
Backup files stored offsite
User manuals
Security Awareness Training
Contractor Agreements
Least Privilege Access
IIF Policies

Technical Controls
User Identification and Passwords
Firewall
Virtual Private Network (VPN)
Encryption
Intrusion Detection System (IDS)

Physical Controls
Guards
Identification Badges
Key Cards
Cipher Locks
C. Byrne Huntley
- 24 Sr Official of Privacy Signature:

C. Byrne Huntley
- 25 Sr Official of Privacy Signoff Date:

May 18, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM MDI - Badging System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2 Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM MDI - Badging System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-46-02-1060-00-401-121
7 Privacy Act System of Records (SOR) Number:	09-40-0013
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	MDI Badging System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Don Deering
12 Provide an overview of the system:	<p>The MDI badging System provides card access and intrusion detection and technical alarm points for the HHS-PSC and approximately 9 remote locations.</p> <p>MDI PIA is being substantially revised. The amended Privacy Act SOR has been published in the Federal Register and is the 45 day comment period.</p> <p>Existing</p>
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Does not share or disclose.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Name, SSN, Photo - For use in granting appropriate building access to provide adequate building access Security.
18 Describe the consent process:	Information is submitted by the individual on paper forms; they are told the information is required before granting building passes; individuals personally submit form and receive badge.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM MDI - Badging System

- 23 Describe the IIF security controls:

Administrative Controls:

 - C&A completed 7/13/6
 - Approved System Security Plan
 - Contingency Plan
 - Backups
 - Offsite storage
 - User Manuals
 - Contractor agreements
 - Least privilege
 - IIF policy

Technical Controls:

 - UserID and Passwords
 - Firewall
 - Process for monitoring and responding to security incidents

Physical Controls:

 - Guards
 - ID Badges
 - Cipher Locks
 - Key Cards
- 24 Sr Official of Privacy Signature:

C. Byrne Huntley
- 25 Sr Official of Privacy Signoff Date:

Aug 31, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Medical Evaluation/Requirements Information Tracking System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2 Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Medical Evaluation/Requirements Information Tracking System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-02-1210-00
7 Privacy Act System of Records (SOR) Number:	09-15-0004
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Medical Evaluation/Requirements Information System (MERITS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Kathy Morring Capt. PHS
12 Provide an overview of the system:	Collect, analyze and manage medical data and produce medical reports on the performance capability of Federal Law Enforcement applicants MERITS is used to Collect, analyze and manage medical data and produce medical reports on the performance capability of Federal Law Enforcement applicants. AUTHORITY FOR MAINTENANCE OF THE SYSTEM: Includes the following with any revisions or amendments: Executive Orders 12107, 12196, and 12564 and 5 U.S.C. chapters 11, 31, 33, 43, 61, 63, and 83.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Internal: Billing. PII is not shared (except as required by law) with anyone outside of HHS or the customer agency.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	MERITS was developed to collect, analyze and manage medical data and produce medical reports on the performance capability of Federal applicants. PII collected is the minimum required for positive identification of the customer agency employees. Due to the arduous and hazardous nature of weapon-carrying positions, Federal agencies have to assess the performance capability of their employees and applicants and develop strategies to maintain their health and fitness.
18 Describe the consent process:	Records in this system are obtained from-- a. The individual to whom the records pertain. b. Agency employee health unit staff. c. Federal and private sector medical practitioners and treatment facilities. d. Supervisors/managers and other agency officials. e. Other agency records. Clients of MERITS will be informed in writing of the confidentiality provisions. Secondary disclosure of information, which was released, is prohibited without client consent.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Medical Evaluation/Requirements Information Tracking System

23	Describe the IIF security controls:	<p>Information in the system is protected by management, operational, and technical security controls commensurate with the level of sensitivity of the system, including:</p> <ul style="list-style-type: none">- All medical records are stored in a separate "locked" file room.- Medical database files are protected by an internal PIX firewall.- ICMP is blocked on the internal pix firewall and the two MERITS SQL servers are configured not to reply to ping request.- Audit trails are in place to monitor unsuccessful login attempts to the MERITS application.- SQL servers are kept up to date with the latest security patches from Microsoft.- Only authorized internal domain users have access to the MERITS database application.- The PIX firewall logs are routinely reviewed for unauthorized access.- Social Security numbers have been removed (except for one client - USSS) from all reports generated out of the MERITS application.
24	Sr Official of Privacy Signature:	C. Byrne Huntley
25	Sr Official of Privacy Signoff Date:	May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Occupational Health Information Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Occupational Health Information Management System
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Oct 31, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-02-1031-00
7 Privacy Act System of Records (SOR) Number:	09-15-0004
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	OHIMS
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Kathy Moring, Capt.; Eric Shih, CDR
12 Provide an overview of the system:	Ohims assists Reviewing Medical Officers (RMOs) in providing surveillance of employees for federal employers to track medical and exposure histories that may adversely impact their work performance, conduct, and health. In order to achieve these objectives, the Ohims case management and reporting system was developed.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Reviewing medical officers and designated customer representatives who aggregate data. As necessary via law enforcement.
	Access to data is restricted to personnel of the DEC and FOH medical review officers assigned to the select agreement. Direct access by non-FOH personnel is not provided. Arrangements can be made through the FOH MRO for an agency to share data sets in Excel or Access format in support of studies conducted by agency representatives. Due to the provisions of FOH policy (M.39, Release of Confidential Medical Information), confidential medical information may be released only to the agency-designated Employee Medical Files System Manager, or upon written consent of th subject employee(s). Non-confidential informatino or non-identifiable data (average weight of the work force) may be released to the agency.
	The RMO works with the agency to assist them in identifying the information that is necessary to meet their program needs, and to assure that the information provided does not breach the requirements of confidentiality. Where policy questions exist, staff or contractors can cll the Associate Medical Director or Director of Clinical Services for policy clarification.

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Occupational Health Information Management System

17	Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	<p>Reviewing medical officers and designated customer representatives who aggregate data.</p> <p>Ohims supports operations functionality for Ohims clients in approximately 5 RMO/ doctor locations throughout the United States.</p> <p>Ohims was completed and placed into production during February 1999. It is comprised of a Microsoft terminal server application that communicates with the centralized Ohims Oracle server at BTS and collects exam data, and a centralized Ohims Reports Oracle database that provides reports to FOH and Customer management. Ohims provides FOH doctors with a tool that meets their surveillance goals, with centralized management and reporting capabilities.</p> <p>“Surveillance management” refers to the process of gathering information on a person who has called into the FOH Clinic for an appointment and signed a Statement of Understanding (SOU). Initial client contacts are classified as a “Pre-Phase”. Information is collected from those individual’s exposure history into the Ohims. Pre-Phase information collected from clients and input into Ohims includes demographic information (i.e., employment type, date of birth, name, employee SSN, gender, etc.), contact information, and employment information. This data is input into Pre-Phase module (labeled Health Surveillance Module by Sentry). Refer to Figure 1 for the graphical process flow.</p> <p>Once complete the exam is sent to the agreement managers who direct it to the Reviewing Medical Officer (RMO) who evaluates the individual’s ability to perform their assigned tasks. The RMO reviews occupational exposure and changes in health to confirm the individual is being properly trained and protected for the work environment.</p> <p>RMO / doctors are able to create and print any of the Ohims reports to effectively manage the individual’s exposures or activity. These reports are stock FOH forms.</p> <p>Patient demographic information is collected to include DOB, SSN or unique ID, height, weight and other basic medical information. The demographic information is used to track the patient in the database. The medical information is used for Health Surveillance. Demographic information includes IIF (DOB, SSN, name, physical characteristics). Submission is voluntary, the agency is notified if the data submission is refused by the employee. The employee agency then uses its own policy and procedures for doing the exam (regulatory, agency mandated, voluntary surveillance, etc.). Consent forms must be signed. All employees are required to read DFOH’s privacy statement when they have their exam in the OHC and are asked to sign an authorization for disclosure which describes what information will be disclosed outside FOH. Form FOH-6 is the disclosure form and form FOH-32 is the privacy statement. All employees are asked to sign a release of information form before information any identifiable information is transferred or release from OHIMS.</p>
18	Describe the consent process:	
19	Does the system host a website?	No
20	Does the website have any information or pages directed at children under the age of thirteen?	No
21	Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22	Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Occupational Health Information Management System

- 23 Describe the IIF security controls:

Firewalls, active directory, locked room, confidentiality agreements, level 6 clearance of team members.
- 24 Sr Official of Privacy Signature:

Users can access Ohims utilizing a Citrix Client connection to the Ohims Terminal Server site through the Intranet. The Ohims ORACLE server maintains an active database of exams and RMO findings, including all demographic and medically confidential data. This is transported to the appropriate nurse or doctor via the Terminal Server though a Citrix Client connection. Additionally, full private firewall and anti-virus protection are provided on each desktop to prevent corruption or unauthorized capture of data. All users are required to have unique user names and passwords to gain access to the database and Ohims application. Strong passwords are required by all users, which consist of eight (8) characters with at least one Capital, one special character and one number. These measures guarantee secure data transmissions and communication between the user community and BTS.
- 25 Sr Official of Privacy Signoff Date:

Darlene Christian
Jan 18, 2007

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM OS Local Area Network Backbone-an ITSC Legacy LAN

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM OS Local Area Network Backbone-an ITSC Legacy LAN
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	OS LAN Backbone
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The OS LAN Backbone is the network supporting operations of the HHS/OS.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Feb 22, 2007

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Parklawn computer room

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Parklawn computer room
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Parklawn computer room
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The Parklawn computer room is a data center facility located in HHS's Parklawn building.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Parklawn General Support System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Parklawn General Support System
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	PSC Parklawn GSS
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The PSC Parklawn GSS is a series of networks that support the operations of the Parklawn building-based portion of PSC (including DCP). Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	This system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	This system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	This system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	This system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Payment Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Payment Management System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 5, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-01-1021-00-402-126
7 Privacy Act System of Records (SOR) Number:	09-90-0024
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	Payment Management System (PMS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Bob Bessio
12 Provide an overview of the system:	Grant payment, cash management system.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The PMS provides data to the agencies that utilize its grant payment services, the Federal Reserve Bank system, and the Treasury. Agency databases, payment activity, disbursement activity, SF224 data, sync data, vendor data, and CAN data
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The PMS maintains automated interfaces to the agency financial systems that utilize its services. The HHS standard financial record is exchanged to identify new grants and modification to existing grants. The PMS provides output to the agencies with regard to disbursement data, synchronization data, SF224 data, and daily payment information to agencies that request it. All information exchanged between the PMS and the agencies is intended to synchronize the two systems with current financial information. In addition, DPM requires the grant recipients to provide hard copy of the 1199 direct deposit form for proper routing of banking information.
18 Describe the consent process:	The data input to the PMS is derived from the agencies, the recipients, and the staff at DPM. The data input to the system from the staff is entered online from workstations located at the DPM site. This information results in the establishment of accounts, subaccounts, and recipient information. The grant recipients are provided with a package of information when they receive a grant award. The packet requests that they provide DPM with identifying information to include taxpayer ID and 1199 direct deposit banking data. This exchange is via hard copy. All other data exchanged between the agencies, treasury, Federal Reserve Bank, and recipients is in an electronic format. DPM has guidebooks that describe the interfaces needed to communicate between systems.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Payment Management System

23 Describe the IIF security controls:	<p>All data collected to support the processes of the PMS is stored in tables. The information is secured through multiple levels of security and access controls have been established to authenticate the user and to determine if the user has the authorization to perform actions requested. The access controls are supplemented with a secure network at both NIH and DPM.</p> <p>Administrative Controls:</p> <ul style="list-style-type: none">- C&A 6/30/5- Approved SSP- Contingency Plan- Backups- Offsite Storage- User Manuals- Contractor Agreements- Least Privilege- IIF Policy <p>Technical Controls:</p> <ul style="list-style-type: none">- UserID and Passwords- Firewall- Virtual Private Network- Intrusion Detection- Process for monitoring and responding to security incidents- Encryption- CAC Cards- PKI <p>Physical Controls:</p> <ul style="list-style-type: none">- Guards- ID Badges- CCTV- Keycards
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Perry Point Local Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Perry Point Local Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Oct 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1040-00-405-143
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	P Point LAN
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Irene Grubb
12 Provide an overview of the system:	The Perry Point LAN provides local connectivity for the AOS office.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	No
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	No
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Dec 1, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Personal Property Facility Local Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Personal Property Facility Local Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Oct 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1016-00-405-143
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	PPF Local Area Network
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Debbie Orfe
12 Provide an overview of the system:	The AOS PPF LAN provides local connectivity for the Personal Property Facility offices and warehouse.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	No
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	No
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Dec 1, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM PropShop (web ordering system)

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM PropShop (web ordering system)
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1016-00-405-143
7 Privacy Act System of Records (SOR) Number:	09-90-0024
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	PropShop Web Ordering System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Debbie Orfe/Jack Sweeney
12 Provide an overview of the system:	To enable items and services to be ordered online by DHHS/Federal agencies. PropShop is critical for providing customer's access 24/7 to requesting products or services from the PPMB. Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The information is shared with the PSC Business Office which uses PRICES for billing customers. Additionally, customers receive a courtesy copy.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The information collected is name, mailing address, phone numbers, financial account information, and e-mail address for the purpose of mailing, shipping or delivering an order. In addition, the financial information is required to bill the customer for the product or service provided.
18 Describe the consent process:	Customers fill in an order page on the website, some PII data is required to complete the order. All PPMB customers must follow the same steps to complete an order. The HHS privacy policy is available electronically by the posting of a link at the bottom of the front page of the site.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM PropShop (web ordering system)

- 23 Describe the IIF security controls:
- Users connect through VPN Firewall Brick; which prevents unauthenticated traffic from entering a protected firewall perimeter. It also provides cryptographic protection against attacks by requiring strong end user authentication. Users are authenticated using strong User IDs and passwords.
- Administrative Controls:
- C&A completed
 - Approved System Security Plan
 - Contingency Plan
 - Backups
 - Offsite storage
 - User Manuals
 - Contractor Agreements
 - Least Privilege
 - IIF Policy
- Technical Controls:
- UserID and Passwords
 - Firewall
 - Intrusion Detection
 - Encryption
 - Process for monitoring and responding to security incidents
- Physical Controls:
- ID Badges
 - Cipher Locks
 - CCTV
- 24 Sr Official of Privacy Signature:
- Darlene Christian
- 25 Sr Official of Privacy Signoff Date:
- May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Purchase Request Information Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Purchase Request Information Management System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1040-00-405-143
7 Privacy Act System of Records (SOR) Number:	09-90-0024
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	Purchase Request Information System (PRISM)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Maggie Pippin
12 Provide an overview of the system:	PRISM is a comprehensive acquisition tracking system that automates each step of the procurement process.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	PRISM does not collect information.
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Purchase Request Information Management System

- 23 Describe the IIF security controls:

Although there is no IIF data, users do authenticate to the database using a unique User ID and password, using roles assigned.
- Administrative:
 - Certification and Accreditation
 - System Security Plan
 - Contingency Plan
 - Backups and offsite storage
 - User manuals
 - Training
 - Contractors adhere to privacy provisions
 - least privilege
 - policy and guidelines for IIF
- Technical:
 - UserID and Passwords
 - Firewalls
 - VPN
 - Encryption
 - Intrusion Detection System
 - Process to monitor and respond to security incidents
- Physical:
 - Guards
 - ID badges
 - CCTV
- 24 Sr Official of Privacy Signature:

C. Byrne Huntley
- 25 Sr Official of Privacy Signoff Date:

May 18, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM QuickHire

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM QuickHire
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Aug 20, 2009
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-02-1130-00-403-251
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	PMT: PSC29
10 System Name:	QuickHire/QuickClass
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Robert Chatfield
12 Provide an overview of the system:	The QuickHire software automates the process of filing jobs. QuickClass - links job description data to announcement and EHRP. Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	uses available job descriptions to populate job announcements. Contains no IIF information.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	uses available job descriptions to populate job announcements. Contains no IIF information.
18 Describe the consent process:	N/A
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Revenue, Invoicing, and Cost Estimation System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Revenue, Invoicing, and Cost Estimation System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-09-02-1014-00-402-124
7 Privacy Act System of Records (SOR) Number:	09-90-0024
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	PSC Revenue, Invoicing, and Cost Estimation System (PRICES)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Mary Woolston (301) 443-1471
12 Provide an overview of the system:	<p>A financial system for the management of a fee for service business. It contains four (4) modules: costing & pricing, forecasting, billing and a web-based customer viewer. PRICES is a system used by the PSC to manage the agency's business operations and facilitate such functions as product costing & pricing, obligation planning, customer invoicing and on-line bill viewing, and cost center management reporting.</p> <p>Existing</p>
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	<p>Cost and estimated demand information used in the development of rates is presented to the HHS Service and Supply Fund Board during our annual rate approval process. Service provision and billing information is provide to customer program management and fiscal staff to support collection of reimbursements.</p> <p>The PRICES costing/pricing module allows cost center managers to input projected cost data, demand forecasts, etc. to enable calculation of fee-for-service rates. As our rates are developed using strict full-cost recovery models, this information is key in setting our product prices. The PRICES billing module allows collection of essential information from PSC functional areas about units of service provided, to whom, POCs, projects to be charged, etc. This information results in actual invoices processed in the core financial system and collection of funds from customers for services delivered. All data collected is essential in documenting that services were provided and serves as the basis for reimbursement to the PSC.</p>
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Revenue, Invoicing, and Cost Estimation System

- 18 Describe the consent process:

The costing and pricing exercise is performed annually and reviewed a mid-year. The PSC Business Office issues an e-mail datacall to Service Directors and cost center managers including guidance for entry of costs and demand into PRICES. Managers obtain this information from historical documents, accounting reports, and other information available to them on future trends, etc. They are informed that the rates developed through PRICES will become, upon approval of the Board, the PSC's published rates for the following fiscal year. o Billing information is collected as services are performed. In most cases, bills will be determined by output of other systems or activities (i.e. FTE counts from HR systems) but in the case of variable services received, providers will record the "who, what, when, and where" and use this information to generate bills. When customers are asked for this information, billers have been instructed to inform them that this information is necessary for billing purposes. Failure to provide the necessary information would likely result in the PSC's inability to offer services to the customer, as all service costs must be recouped through fee revenues.
- 19 Does the system host a website?

No
- 20 Does the website have any information or pages directed at children under the age of thirteen?

No
- 21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?

Yes
- 22 Are there technical controls present?

Yes
- 23 Describe the IIF security controls:

Administrative controls:

- C&A completed 7/5/6

- approved System Security Plan

- Contingency Plan

- System backups

- Offsite storage

- User manuals

- Contractor agreements

- Least Privilege access

- IIF policy

Technical Controls:

- UserID and Passwords

- Firewall

- Intrusion Detection

- Process for monitoring and responding to security incidents

Physical Controls:

- Guards

- ID Badges

- Cipher Locks

- CCTV
- 24 Sr Official of Privacy Signature:

Darlene Christian
- 25 Sr Official of Privacy Signoff Date:

May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM SAMHSA Local Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM SAMHSA Local Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	SAMHSA General Support System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The SAMHSA GSS is a local area network supporting operations of the HHS/SAMHSA operating division.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	The system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Service Tracking Module

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Service Tracking Module
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1015-00-119-066
7 Privacy Act System of Records (SOR) Number:	09-15-0004
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Service Tracking Module (STM)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Kathy Moring
12 Provide an overview of the system:	STM provides a complete set of tools to define the interagency agreements between FOH and its customer agencies, collect evidence of the fulfillment of those agreements, and provide external financial systems the information they need to bill for services rendered. STM also provides tools to view reports against data stored within it
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Does not share
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Medical notes and employee information in addition to personal identifying information
18 Describe the consent process:	Records in this system are obtained from-- a. The individual to whom the records pertain. b. Agency employee health unit staff. c. Federal and private sector medical practitioners and treatment facilities. d. Supervisors/managers and other agency officials. e. Other agency records. Clients will be informed in writing of the confidentiality provisions. Secondary disclosure of information, which was released, is prohibited without client consent.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Information in the system is protected by management, operational, and technical controls comensurate with the level of sensitivity of that information, including: - Data is stored in a password protected data system - Data system is protected by network firewalls - Computer systems maintained at secured government site. - Electronic data is encrypted. - Users can enter SSN or Query on SSN to validate a person's identity, but can not retrieve SSN for viewing. - Standard Reports do not display SSN. - Only specialized reports provided directly to authorized agency reps include this information. These reports can only be run by a select group of people and are provided physically via US Mail directed to the authorized person.

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Service Tracking Module

24 Sr Official of Privacy Signature: Darlene Christian

25 Sr Official of Privacy Signoff Date: May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM SSC Local Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM SSC Local Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 16, 2007
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0001-00-404-139
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	PSC SSC LAN
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alan Smith
12 Provide an overview of the system:	The PSC SSC LAN is a local area network supporting the operations of the Silver Spring Center based portion of the HHS/PSC (HRS). Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The system does not collect, maintain or disseminate IIF.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The system does not collect, maintain or disseminate IIF.
18 Describe the consent process:	The system does not collect, maintain or disseminate IIF.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The system does not collect, maintain or disseminate IIF.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Web Employee Assistance Program Information System

1	
The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer "No" to that question.	
2	Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Web Employee Assistance Program Information System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1021-00-110-248
7 Privacy Act System of Records (SOR) Number:	09-90-0010
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	DOCID:fr07mr97-105
10 System Name:	Web Employee Assistance Program Information System(Web EAP)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Kathy Mooring
12 Provide an overview of the system:	Formerly called EAPIS Manage EAP clinician activity. This system contains a written or electronic record on each EAP client. These records typically contain demographic data such as client name, date of birth, grade, job title, home address, telephone numbers, and supervisor's name and telephone number. The system includes records of services provided by HHS staff and services provided by contractors.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	IIF is not shared (except as required by law) with anyone outside of HHS.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The information contained in each record is a documentation of the nature and extent of the client's problem(s). When the intervention plan includes referral(s) to the treatment or other facilities outside the EAP, the record also documents this referral information. The information contained in each record is also used for monitoring the client's progress in resolving the problems(s). Anonymous information from each record is also used to prepare statistical reports and conduct research that helps with program management. Information in this system of records is: (1) Supplied directly by the individual using the program, or (2) supplied by a member of the employee's family, or (3) derived from information supplied by the employee, or (4) supplied by sources to/from whom the individual has been referred for assistance, or (5) supplied by Department officials (including drug testing officers), or (6) supplied by EAP counselors, or (7) supplied by other sources involved with the case. Clients of the EAP will be informed in writing of the confidentiality provisions. Secondary disclosure of information, which was released, is prohibited without client consent.
18 Describe the consent process:	
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Information in the system is protected by management, operational, and technical security controls commensurate with the level of sensitivity of the system.

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Web Employee Assistance Program Information System

24 Sr Official of Privacy Signature: Darlene Christian

25 Sr Official of Privacy Signoff Date: May 16, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASAM Web Warehouse Inventory Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS ASAM Web Warehouse Inventory Management System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-02-1018-00-405-144
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	Web Warehouse Inventory Management System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Debbie Orfe/Jack Sweeney
12 Provide an overview of the system:	Provides inventory management, space control, order entry, receiving, and storage functionality for the PPMB. WebWIMS provides material handling, inventory control, and employee assignment using radio frequency (narrow band wireless) and barcode technology with optional interfaces to conveyors, carousels, picking devices, etc. A wireless technology is required to accommodate the constant movement of product, mobility of users, and accommodate the demands for real time data in internal inventory control and space management.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Internal Branch Employees. PSC/Business Office - PRICES for billing customers, Customer courtesy copy Information will be collected for order entry purposes.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	
18 Describe the consent process:	Paper/verbal data will be collected and entered by Branch employees. Electronic notifications will be used to convey the information to the employees. The employees will need to make a decision on cancelling the online order.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Full suite of controls in accordance with SP 800-53. See the Security plan for details. Administrative:- Certification and Accreditation- System Security Plan- Contingency Plan- Backups and off-site storage- User Manuals- Training- Contractor privacy clauses- Least privilege- Policy and guidelines for IIF Technical:- UserID and passwords- Firewall- Encryption- Intrusion Detection System- Privacy/security incidents process Physical:- ID Badges- Cipher locks- CCTV
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Jul 17, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASPA HHS Answers System (RightNow Service)

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASPA HHS Answers System (RightNow Service)
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 27, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0003-00-305-108
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	PMT: HHS20
10 System Name:	HHS Answers System (RightNow Service)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alice M. Bettencourt
12 Provide an overview of the system:	Provides dynamically displayed Frequently Asked Questions and Answers on the HHS.gov web site; accepts Suggested Questions and Answers feedback from web site users.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Provide email address to OPDIV team member with available expertise to respond to question. OPDIV Web Team member who has available expertise to respond to a specific question.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Collects questions and proposed answers to HHS-related issues. Only IIF information collected is email address used to respond to questions. Requestor voluntarily provides this information. It is only kept long enough to respond to questioner, and then is deleted.
18 Describe the consent process:	Email address collected on the same web site form that an individual uses to ask a question. They can choose to include their email address or not. If they don't, they will not receive a direct response to their question.
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Only Web Team Members and specific OPDIV expert have access to email address. Access controlled by user ID and password, and assignment.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASPA HHS Enterprise Portal

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASPA HHS Enterprise Portal
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Jul 20, 2005
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0003-00-305-108
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	HHS Web Portal
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alice Bettencourt
12 Provide an overview of the system:	To provide integrated collaboration and application access across the HHS enterprise. To provide employees with instant access to timely information on the vital health and human service programs that reside within HHS. To reach employees directly and quickly with information in a form they can readily use. The Web Portal will facilitate collaboration among the thirteen agencies and numerous Department-level offices that comprise HHS.
13 Indicate if the system is new or an existing one being modified:	New
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	work-related information for collaboration purposes no IIF information will be collected
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Automated Financial Statement System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT Automated Financial Statement System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 25, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-01-02-001-00-402-129
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	AFS -- Automated Financial Statement System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Kevin Kuesters
12 Provide an overview of the system:	Collects OPDIVs' financial statement data to generate the HHS-wide year-end and quarterly statements
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	OPDIV financial data is collected to produce a consolidated financial statement for HHS -- for year-end and quarterly submissions to OMB. The data used is not confidential, not sensitive, and not private. No IIF information is collected.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Financial Information Reporting System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT Financial Information Reporting System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 25, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	Recently discovered system. Currently catching up with requirements.
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	FIRS -- Financial Information Reporting System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Edward A. Martin
12 Provide an overview of the system:	Used in the development of outlay estimating, tracking spending, and tracking apportionments. It provides a repository for detailed historical obligations and outlay data for all uncanceled appropriation fiscal years. It also provides rates for accounts and budget activities for "waterfall tables" used in developing outlay estimates for the President's Budget and required to be submitted in support of the Department's outlay estimates.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	FIRS is used in developing outlay estimates for the President's Budget and required to support the HHS estimates. It also provides the official summary of Treasury outlay reports, apportionment logging and tracking to permit the HHS OPDIVs to find out the status of their apportionments as they move from HHS to OMB and back.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Grants.gov

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT Grants.gov
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 26, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-01-99-01-1316-24-110-249
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	PMT: HHS3
10 System Name:	Grants.gov -- Find and Apply
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Rebecca Spitzgo
12 Provide an overview of the system:	Grants.gov is one of the PMA E-Gov initiatives and is deploying 2 Government-wide grants mechanisms: Find and Apply. The Find mechanism allows Federal agencies to post funding opportunities on Grants.gov and allows potential applicants to search these opportunities. All grant-making agencies were publishing funding opportunities by October 2003. The Apply mechanism allows agencies to post their application packages on Grants.gov and allows applicants to download the packages and complete them offline, and submit them electronically. The Apply mechanism was launched on October 31, 2003. Grants.gov operates a Contact Center at a state-of-the art secure hosting facility to support agency and applicant users. Grants.gov also operates a forms factory to develop (electronic) forms for the grant-making agencies. Grants.govs day-to-day activities are operated out of the Grants.gov Program Management Office.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Allows Federal agencies to post funding opportunities, and allows potential applicants to search these opportunities. Does not contain IIF information.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	Suzi Connor
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT HHS EA Repository (Metis)

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT HHS EA Repository (Metis)
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 3, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-03-00-01-0001-00-304-103
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Metis Team Server
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	John Teeter
12 Provide an overview of the system:	Used to track and analyze the layers of the HHS Enterprise Architecture (EA) and the relationships between those layers.
13 Indicate if the system is new or an existing one being modified:	New
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Infrastructure and process information for Capital Panning and Investment purposes. No IIF information is collected.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT HHS IT Portfolio Management Tool (ProSight)

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT HHS IT Portfolio Management Tool (ProSight)
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 27, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-03-00-01-0003-00-304-102
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	PMT (Prosight)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Philip W. Clark
12 Provide an overview of the system:	To support the Department's Capital Planning and Investment Control (CPIC) process and the information technology (IT) budget formulation process, including the support of data collection and generation for OMB Exhibit 53 and 300 reporting.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Summary and detailed information on individual IT investments and across OPDIV IT investments.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Information Collection Review & Analysis System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT Information Collection Review & Analysis System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 27, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-44-02-1010-00-404-142
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	ICRAS
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Robert Polson
12 Provide an overview of the system:	To assist HHS to electronically administer and manage its information collection clearance responsibilities under the Paperwork Reduction Act (PRA). Information Collection Review & Approval System (ICRAS) is a web-based database application that helps Federal agencies electronically administer and manage its information collection clearance responsibilities under the Paperwork Reduction Act (PRA).
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	OMB
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	ICRAS provides users with the functionality to create and upload OMB PRA forms 83-I, 83-C, 83-E, 83-D, Supporting Statements, draft and final Federal Register postings, laws, statutes, regulations, memos and cover letters, and OMB's Notices of Action in reply to the submittal of the OMB 83 formxs and attachments.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Information Security Data Manager

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT Information Security Data Manager
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 30, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0010-00-404-140
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	ISDM
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Fred Cole
12 Provide an overview of the system:	Was replaced by ProSight-FISMA
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	FISMA data
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Tracking Accountability in Government Grants System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question

Response

- 1 System:

OS ASRT Tracking Accountability in Government Grants System
- 2 Is this a new PIA?

No
- 3 If this is an existing PIA, please provide a reason for revision:

PIA Validation
- 4 Date of this Submission:

May 4, 2006
- 5 OPDIV Name:

OS
- 6 Unique Project Identifier (UPI) Number:

009-90-01-01-02-0003-00-301-093
- 7 Privacy Act System of Records (SOR) Number:

N/A
- 8 OMB Information Collection Approval Number:

N/A
- 9 Other Identifying Number(s):

PMT: OS11
- 10 System Name:

Tracking Accountability of Government Grants System
- 11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:

HHS/OS/ASAM
- 12 Provide an overview of the system:

The TAGGS database is a central repository for grants awarded by the twelve HHS Operating Divisions (OPDIVs). TAGGS tracks obligated grant funds at the transaction level. The TAGGS database is a central repository for grants awarded by the twelve HHS Operating Divisions (OPDIVs). TAGGS tracks obligated grant funds at the transaction level.
- 13 Indicate if the system is new or an existing one being modified:

Existing
- 14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?

No
- 15 Is the system subject to the Privacy Act?

No
- 16 If the system shares or discloses IIF please specify with whom and for what purpose(s):

N/A
- 17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:

Tracks HHS-obligated grant funds. Does not contain IIF information.
- 18 Describe the consent process:

N/A
- 19 Does the system host a website?

Yes
- 20 Does the website have any information or pages directed at children under the age of thirteen?

No
- 21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?

No
- 22 Are there technical controls present?

Yes
- 23 Describe the IIF security controls:

N/A
- 24 Sr Official of Privacy Signature:

C. Byrne Huntley
- 25 Sr Official of Privacy Signoff Date:

Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Unified Financial Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question

Response

- 1 System:

OS ASRT Unified Financial Management System
- 2 Is this a new PIA?

No
- 3 If this is an existing PIA, please provide a reason for revision:

PIA Validation
- 4 Date of this Submission:

May 3, 2006
- 5 OPDIV Name:

OS
- 6 Unique Project Identifier (UPI) Number:

009-00-01-01-01-0001-00-402-124
- 7 Privacy Act System of Records (SOR) Number:

09-90-0024
- 8 OMB Information Collection Approval Number:

N/A
- 9 Other Identifying Number(s):

NIH CIOSP2 Contract No. 263-01-D-0052; PMT: HHS19
- 10 System Name:

Unified Financial Management System
- 11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:

Terry L. Hurst
- 12 Provide an overview of the system:

The Unified Financial Management System (UFMS) is a business management tool designated to provide timely and reliable information to improve financial, business and operational functions within HHS. UFMS is designated to satisfy 3 categories of financial management systems requirements mandated by the Federal Financial Management Improvement Act (FFMIA). These are: 1) Federal financial management systems requirements promulgated by OMB and the Joint Financial Management Improvement Program (JFMIP); 2) federal accounting standards; and 3) the United States Standard General Ledger at the transaction level.
- 13 Indicate if the system is new or an existing one being modified:

Existing
- 14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?

Yes
- 15 Is the system subject to the Privacy Act?

Yes
- 16 If the system shares or discloses IIF please specify with whom and for what purpose(s):

The information will be shared between the Office of the Secretary (OS), Centers for Disease Control (CDC), Food and Drug Administration (FDA), National Institutes of Health (NIH), Administration on Aging (AoA), Administration for Children and Families (ACF), Agency for Healthcare Research and Quality (AHRQ), Health Resources and Services Administration (HRSA), Indian Health Service (IHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Centers for Medicare and Medicaid Services (CMS), the U.S. Department of the Treasury, and the U.S. Department of Defense.
- 17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:

The system will collect transactional and accounting data to meet functional requirements for Core financial management functions: General Ledger, Budget Execution, Payment and Receipt Management, Cost Management, Commitments and Obligations, and Reporting.
- 18 Describe the consent process:

The information will be keyed into the database. The information may come directly from the private individual source or from other offices within the UFMS boundaries. All notification for the use and protection of private information will be conveyed in writing during training and by electronic notice. Although the need to share this information outside the UFMS system boundaries is not required, it could be in the future. Processes are still being developed to determine how consent will be given with regard to what information is collected and how it will be shared.
- 19 Does the system host a website?

No
- 20 Does the website have any information or pages directed at children under the age of thirteen?

No

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Unified Financial Management System

- 21

Are there policies or guidelines in place with regard to the retention and destruction of IIF?

Yes
- 22

Are there technical controls present?

Yes
- 23

Describe the IIF security controls:

The system will be secured by methods prescribed in the System Security Plan (SSP). The SSP calls for system life-cycle practices for Federal financial systems. The methods employed include risk assessments and implementation of management, operational, and technical controls.
- 24

Sr Official of Privacy Signature:

C. Byrne Huntley
- 25

Sr Official of Privacy Signoff Date:

May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS ASRT Watchfire Web XM

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS ASRT Watchfire Web XM
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Aug 31, 2005
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-00-02-00-01-0003-00-305-108
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Watchfire WebXM
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Alice M. Bettencourt
12 Provide an overview of the system:	Automates the analysis of online properties to identify issues that jeopardize HHS's identity and reputation, mitigates online risk by identifying and alerting executives about privacy and data security issues, and provides an inventory and technology map of their entire online presence.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Analyzes HHS online information to improve information integrity, security, and inventory. Contains no IIF information.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS DAB Automated Case Tracking System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS DAB Automated Case Tracking System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 3, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-09-02-0005-00-404-141
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	PMT: OS20
10 System Name:	DAB ACTS
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Michelle Ruhren
12 Provide an overview of the system:	Tracks status of DAB cases via automation. Separate modules for each DAB division.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Information enables DAB staff to track status of their various cases. Does not contain IIF information.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS IOS Security Information Processing System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS IOS Security Information Processing System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 24, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-44-02-3334-00-403-134
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Security Information Processing System (SIPS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Doug Pruett
12 Provide an overview of the system:	Houses the Department-wide records for all employees and contractors who occupy National Security or Public Trust positions. Existing
13 Indicate if the system is new or an existing one being modified:	
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	Hiring supervisor
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Maintains information about background screenings on employees and contractors occupying National Security or Public Trust positions.
18 Describe the consent process:	Interviews, forms information suppliers will be told that the information is being collected in connection with a security background check. Individual being investigated will provide basic information and are aware of the background screening requirements upon applying for the position.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	Secured stand-alone application located in a double-secured location.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS IOS Strategic Work Information and Folder Transfer

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS IOS Strategic Work Information and Folder Transfer
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	Apr 25, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-44-02-7255-00-404-142
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	SWIFT
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Vanessa McClam
12 Provide an overview of the system:	SWIFT is the records and document management system for the Office of the Secretary, Executive Office. Swift provides scanning, classifying indexing storage, retrieval, workflow, dissemination, and tracking capabilities for all of the documents received or generated by the executive office.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Documents received and/or generated by the executive office. No IIF information is collected or maintained.
18 Describe the consent process:	N/A
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS OCR Program Information Management System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS OCR Program Information Management System
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-09-02-0001-00-404-142
7 Privacy Act System of Records (SOR) Number:	09-90-0052 Federal Register / Vol. 67, No. 173 / Friday, September 6, 2002
8 OMB Information Collection Approval Number:	0990-0269
9 Other Identifying Number(s):	N/A
10 System Name:	PIMS -- Program Information Management System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Norman Oslik
12 Provide an overview of the system:	Case tracking, document management and executive information. The Program Information Management System (PIMS) was developed to allow OCR to manage more effectively its program information needs and to integrate all of OCR's various business processes, including all its compliance activities, to allow for real time access and results reporting and other varied information management needs. Among other things, PIMS was developed to support the collection of compliance related and other identifying information needed for OCR to complete compliance activities and determinations. Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975 and other statutes that prohibit discrimination by programs or entities that receive Federal financial assistance from HHS; Federally-conducted programs in cases involving disability-based discrimination under Section 504 of the Rehabilitation Act; state and local public entities in cases involving disability-based discrimination under Title II of the Americans with Disabilities Act; certain health plans, health clearinghouses and health care providers with respect to enforcement of the standards for privacy of individually identifiable health information under the privacy rule issued pursuant to the Health Insurance Portability and Accountability Act (HIPAA).
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS OCR Program Information Management System

- 16

If the system shares or discloses IIF please specify with whom and for what purpose(s):
- DoJ, EEOC, Federal Mediation & Conciliation Service, other Federal agencies, Congressional offices (but only in response to forwarded constituent inquiries) -- as part of routine uses as specified in Syxstem of Records notice. permitting disclosure to a congressional office, allows subject individuals to obtain assistance from their representatives in Congress, should they so desire. Such disclosure would be made only pursuant to the request of the individual. allows disclosure to the Department of Justice or a court in the event of litigation. allows referral to the appropriate agency, in the event that a System of Records maintained by this agency to carry out its functions indicates a violation or potential violation of law. allows disclosure of records to contractors for the purpose of processing or refining records in the system Complaints involving alleged age discrimination are referred to the Federal Mediation and Conciliation Service consistent with the regulations implementing the Age Discrimination Act of 1975. Certain employment cases may be referred to the Equal Employment Opportunity Commission. In each of these instances, the allegations themselves are forwarded, but the data on the cases resident in OCR's PIMS system is not forwarded.

17

Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:

The mandatory fields for the new forms are: name, contact information, whether the complaint is being filed on behalf of someone else, the basis for the complaint (e.g., race/color/national origin, age, religion, gender (male/female), disability, violation of the privacy of protected health information), the entity against which the complaint is being filed, when the incident(s) occurred, a brief description of what happened and the complainant's signature. In some situations, the law requires OCR to get the complainant's signature, in other cases it is voluntary. In addition, several voluntary fields are included to assist OCR in processing the complaint and to provide appropriate customer service. Those fields are: an alternate person to contact if the complainant cannot be reached; whether this complaint has been filed with other agencies or is the basis of a lawsuit and, if so, to identify where else the complaint has been filed; and whether the complainant needs special accommodations for OCR to communicate with them (e.g. Braille, TDD). We also have included a limited number of questions to be answered on a voluntary basis to help us better assess whether we are adequately reaching and providing service to populations whose rights are covered by our statutory authorities. These questions concerning the complainant or the person on whose behalf a complaint has been filed, are: ethnicity, race, primary language spoken (if other than English), and the means by which the complainant learned about being able to file complaints with the Office for Civil Rights. Failure to answer the voluntary questions will not affect OCR's decision to process a complaint. Use of these forms is voluntary. Alternatively, a complainant may choose to submit a complaint in the form of a letter, or electronically. In its Medicare certification process, each applicant for certification responds to OCR's data request. The questions pertain to the policies and procedures of nondiscrimination; communication with persons who are Limited English proficient or sensory impaired; required notices; provision of auxiliary aids to persons with sensory, manual or speech impairments; grievance procedures for disability discrimination allegations; and information regarding restrictions based on age. The information received in response to a data request does not normally include personally identifiable information.

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS OCR Program Information Management System

18	Describe the consent process:	<p>For individual complaints, the initial information is collected from the complainant, or someone acting on their behalf. It is collected using one of OCR's two approved complaint forms for discrimination complaints and health information privacy complaints, which are available for downloading from OCR's web site. Alternatively, a complainant may choose to submit a complaint in the form of a letter, or electronically. OCR's two complaint forms each contain a privacy notice describing how the complainants information will be used. The discrimination notice is similar to the following health information privacy notice: "Filing a complaint with OCR is voluntary. However, without the information requested above, OCR may be unable to proceed with your complaint. We collect this information under authority of the Privacy Rule issued pursuant to the Health Insurance Portability and Accountability Act of 1996. We will use the information you provide to determine if we have jurisdiction and, if so, how we will process your complaint. Information submitted on this form is treated confidentially and is protected under the provisions of the Privacy Act of 1974. Names or other identifying information about individuals are disclosed when it is necessary for investigation of possible health information privacy violations, for internal systems operations, or for routine uses, which include disclosure of information outside the Department for purposes associated with health information privacy compliance and as permitted by law. It is illegal for a covered entity to intimidate, threaten, coerce, discriminate or retaliate against you for filing this complaint or for taking any other action to enforce your rights under the Privacy Rule. You are not required to use this form. You also may write a letter or submit a complaint electronically with the same information. To submit an electronic complaint, go to our web site at: http://www.hhs.gov/ocr/privacyhowtofile.htm. To mail a complaint see reverse page for OCR Regional addresses." In addition, for all complaints received that OCR initially determines are within our jurisdiction, complainants receive an acknowledgment letter that includes a fact sheet titled Protecting Personal Information in Complaint Investigations. This fact sheet describes how the information is protected by OCR, how a person can request a copy of their file under the Freedom of Information Act, to what other government agencies OCR may legally give the complainants information (see Section 4 above), and what protections are in place if someone else requests the complainants file. Where investigation of a complaint requires providing the complainants name to the covered entity against whom the complaint is filed, the complainant is always asked to sign a consent form allowing release of their name to the covered entity. Similarly, if investigation of the complaint requires acquiring the complainants medical record from the covered entity, the complainant is asked to sign an authorization allowing OCR to request the information.</p>
19	Does the system host a website?	No
20	Does the website have any information or pages directed at children under the age of thirteen?	No
21	Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22	Are there technical controls present?	Yes

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.



HHS Privacy Impact Assessment (PIA) Summary

OS: OS OCR Program Information Management System

- 23 Describe the IIF security controls:
- Only authorized OCR users whose official duties require the use of such information have access to the information in the system. No users outside of OCR have access to PIMS. Specific access is structured around need and is determined by the person's role in the organization. Access is managed through the use of electronic access control lists, which regulate the ability to read, change and delete information in the system. Each OCR user has read access to designated information in the system, with the ability to modify only their own submissions or those of others within their region or group. Data identified as confidential is so designated and only specified individuals are granted access. The system maintains an audit trail of all actions against the data base. All electronic data is stored on servers maintained in locked facilities with computerized access control allowing access to only those support personnel with a demonstrated need for access. A database is kept of all individuals granted security card access to the room, and all visitors are escorted while in the room. The server facility has appropriate environmental security controls, including measures to mitigate damage to automated information system resources caused by fire, electricity, water and inadequate climate controls. Access control to servers, individual computers and databases includes a required user log-on with a password, inactivity lockout to systems based on a specified period of time, legal notices and security warnings at log-on, and remote access security that allows user access for remote users (e.g., while on government travel) under the same terms and conditions as for users within the office. System administrators have appropriate security clearance. Printed materials are filed in secure cabinets in secure Federal facilities with access based on need as described above for the automated component of the PIMS system.
- 24 Sr Official of Privacy Signature:
- C. Byrne Huntley
- 25 Sr Official of Privacy Signoff Date:
- Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS OGC Matter Tracking System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2 Summary of PIA Required Questions

Question	Response
1 System:	OS OGC Matter Tracking System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-90-01-44-02-1010-00-404-138
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Matter Tracking System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	John Shimabukuro
12 Provide an overview of the system:	A centralized system that enables a sophisticated analysis of not only current but also projected workloads across the enterprise. It provides a robust data capture, workflow, timekeeping, and reporting solution set that enables better strategic planning and performance-based budgeting.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	OGC attorneys, paralegals and legal staff
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Every piece of information -- notes, case development information, legal research, correspondence, pleadings, evidence, court calendars, task lists, statutes of limitations and other critical deadlines, time and expense entries, budgets, and e-mails -- is automatically placed in the right electronic matter file under the matter and client numbers used by an organizations accounting system. No IIF information is collected or maintained in MTS.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS OPHS Annual Report on Possible Resource Misconduct System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2Summary of PIA Required Questions

Question	Response
1 System:	OS OPHS Annual Report on Possible Resource Misconduct System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	Recently discovered system. Catching up with requirements.
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	0937-0198
9 Other Identifying Number(s):	N/A
10 System Name:	ARPRM -- Annual Report on Possible Research Misconduct System
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Office of Research Integrity Office of Public Health and Science Office of the Secretary U.S. Department of Health and Human Services
12 Provide an overview of the system:	This reporting system is essential for the over 1400 institutions that receive federal research funding from the US Department of Health and Human Services (HHS), and are mandated to complete this report annually between January and March.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	Research integrity information is collected. No privacy or sensitive information is collected or maintained.
18 Describe the consent process:	N/A
19 Does the system host a website?	Yes
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	Jun 28, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS OPHS Commissioned Officers Personnel and Payroll System

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS OPHS Commissioned Officers Personnel and Payroll System
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	Initial PIA Migration to ProSight
4 Date of this Submission:	Aug 18, 2004
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-02-01-1020-00-403-131
7 Privacy Act System of Records (SOR) Number:	09-90-0018
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	Commissioned Officers Pay and Personnel System (COPPS)
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Captain Denise Canton
12 Provide an overview of the system:	Payroll and personnel actions for the Commissioned Corps COPPS provides pay and personnel services for public health commissioned officers from entry to exit as well as in retirement and for their dependents.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	Yes
15 Is the system subject to the Privacy Act?	Yes
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	The information is shared only as part of the payroll processing.
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	The information in the system is the range of personal information necessary for providing full pay and personnel services.
18 Describe the consent process:	Information is submitted by the individual as part of their in-processing. Updates to the information is supplied by the individuals as necessary.
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	Yes
22 Are there technical controls present?	Yes
23 Describe the IIF security controls:	The information in the system is protected by management, operational, and technical security controls commensurate with the level of sensitivity of the system. The system is certified and accredited.
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS OPHS Division of Commissioned Personnel Local Area Network

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS OPHS Division of Commissioned Personnel Local Area Network
2 Is this a new PIA?	Yes
3 If this is an existing PIA, please provide a reason for revision:	-
4 Date of this Submission:	Oct 4, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	009-91-01-08-01-1100-00-403-250
7 Privacy Act System of Records (SOR) Number:	No
8 OMB Information Collection Approval Number:	No
9 Other Identifying Number(s):	No
10 System Name:	DCP LAN
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Carol Arbogast
12 Provide an overview of the system:	The DCP LAN provides local connectivity for the DCP office.
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	No
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	No
18 Describe the consent process:	No
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	No
24 Sr Official of Privacy Signature:	Darlene Christian
25 Sr Official of Privacy Signoff Date:	Dec 1, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.

HHS Privacy Impact Assessment (PIA) Summary

OS: OS Security Program

1

The following required questions represent the information necessary to complete the PIA Summary for transmission to the Office of Management and Budget. Note: If a question or its response is not applicable, please answer “No” to that question.

2

Summary of PIA Required Questions

Question	Response
1 System:	OS Security Program
2 Is this a new PIA?	No
3 If this is an existing PIA, please provide a reason for revision:	PIA Validation
4 Date of this Submission:	May 30, 2006
5 OPDIV Name:	OS
6 Unique Project Identifier (UPI) Number:	N/A
7 Privacy Act System of Records (SOR) Number:	N/A
8 OMB Information Collection Approval Number:	N/A
9 Other Identifying Number(s):	N/A
10 System Name:	OS Security Program
11 System Point of Contact (POC). The System POC is the person to whom questions about the system and the responses to this PIA may be addressed:	Mike Stringer
12 Provide an overview of the system:	OS IT Security Program
13 Indicate if the system is new or an existing one being modified:	Existing
14 Does/Will the system collect, maintain (store), disseminate and/or pass through IIF within any database(s), record(s), file(s) or website(s) hosted by this system?	No
15 Is the system subject to the Privacy Act?	No
16 If the system shares or discloses IIF please specify with whom and for what purpose(s):	N/A
17 Describe in detail the information the agency will collect, maintain, or disseminate and why and for what purpose the agency will use the information:	N/A
18 Describe the consent process:	N/A
19 Does the system host a website?	No
20 Does the website have any information or pages directed at children under the age of thirteen?	No
21 Are there policies or guidelines in place with regard to the retention and destruction of IIF?	No
22 Are there technical controls present?	-
23 Describe the IIF security controls:	N/A
24 Sr Official of Privacy Signature:	C. Byrne Huntley
25 Sr Official of Privacy Signoff Date:	May 30, 2006

Note on IIF: Any question about IIF seeks to identify any, and all, personal information associated with the system. This includes any IIF, whether or not it is subject to the Privacy Act, whether the individuals are employees, the public, research subjects, or business partners, and whether provided voluntarily or collected by mandate. Later questions will try to understand the character of the data and its applicability to the requirements under the Privacy Act or other legislation. Note: If no IIF is contained in the system, please answer the remaining required questions, then promote the PIA to the Sr. Privacy Official who will authorize the PIA. Note: If this system contains IIF, all remaining questions on the PIA Form Tabs must be completed prior to signature and promotion.